PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/599,247			ing Date 31/2008	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛			OTHER THAN	
Н	FOR	N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	_	RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1 16(a), (b),	or (e))	N/A		N/A		N/A		1	N/A	
SEARCH FEE (37 CFR 1 16(k), (i), or (m))			N/A		N/A		N/A		1	N/A	
	EXAMINATION FE (37 CFR 1,16(o), (p),		N/A		N/A		N/A		1	N/A	
	TAL CLAIMS CFR 1.16(i))		minus 20 =		٠		x s =		OR	x s =	
IND	EPENDENT CLAIM CFR 1.16(h))	s	minus 3 =				x \$ =		1	X \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	If the specification and drawi sheets of paper, the applicati is \$250 (\$125 for small entity additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37		n size fee due for each n thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))]		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL	
APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY	
AMENDMENT	05/05/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR	· 12	Minus	20	= 0	1	X \$26 =	0	OR	x s =	i
	Independent (37 CFR 1.16(h))	· 2	Minus	3	- 0	1	X \$110 =	Ó	OR	X \$ =	
	Application Size Fee (37 CFR 1.16(s))										
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					l			OR		
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16())	•	Minus		-		x s =		OR	x s =	
	Independent (37 CFR 1 16(h))	*	Minus	***	-		X \$ =		OR	X \$ =	
Π̈́	Application Size Fee (37 CFR 1.16(s))					1			ı		
ΑN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* if the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 39 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, perpang, and submitting the completed application from the USPTO. Time will way depending upon the individual case. Any comments of a meanure of time you require to complete this form and/or suppetitions for reducing this further, about the sent to the Chief Information Officer. U.S. Patient and Trademark Office, U.S. Department of Commerce, O.P. Do. Nrt 400, Alexandria, V.M. 22313-1450. D. DOX OTSEND FEES OR LOWNELTED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.